

Webcast #2: Viewing Guide

Topic 1

Forming Partnerships in Pregnancy through Feeding

Part I: Why is it important?

Key Head Start Program Performance Standard

1304.21(a)(3) Grantee and delegate agencies must support social and emotional development by:

(ii) Planning for routines and transitions so that they occur in a timely, predictable and unrushed manner according to each child's needs.

Other Relevant Standards

Please see the list of Selected Standards Supporting Healthy, Safe, and Developmentally Appropriate Routines for Infants and Toddlers on page 5 of this document.

Selected Child Development Research and Information

- U.S. Department of Health and Human Services (2006). *Preliminary findings from the Early Head Start Prekindergarten Followup*. Early Head Start Research and Evaluation Project. Washington, DC: Administration for Children and Families, Office of Planning, Research and Evaluation.
- U.S. Department of Health and Human Services (1994). *Statement of the Advisory Committee on Services to Infants and Toddlers*. Washington, DC.
- U.S. Department of Health and Human Services (2003). *Healthy People 2010 Progress Review on Maternal, Infant, and Child Health.* Available at http://www.healthypeople.gov/data/2010prog/focus16/

Part II: What does it look like in practice?

Key Points:

- ▶ The child in the context of family gives the baby resilience.
- ▶ Families are much more receptive to new information and much more willing to get on board with behavior change when they are expecting a child versus when the child is already born.
- ▶ Most decisions families make at this stage are culture-based.
- ▶ Education must go beyond the brochure.
- ▶ The goal is a triad of family, program, and community partners working together to form lifelong healthy eating habits.

Part III: How do we know it's happening?

Key Points:

- ▶ Look at the documentation
- ▶ Talk to people—both teaching staff and families
- Look at the environment
- Description Be by Be careful and sensitive observers

Topic 9

Feeding for Infants

Part I: Why is it important?

Key Head Start Program Performance Standard

1304.21(a)(3) Grantee and delegate agencies must support social and emotional development by:

(ii) Planning for routines and transitions so that they occur in a timely, predictable and unrushed manner according to each child's needs.

Other Relevant Standards

Please see the list of Selected Standards Supporting Healthy, Safe, and Developmentally Appropriate Routines for Infants and Toddlers on page 5 of this document.

Selected Child Development Research and Information

American Academy of Pediatrics (2005). *Breastfeeding and the use of human milk* (policy statement). Available at http://aappolicy.aappublications.org/cgi/content/full/pediatrics:115/2/496#T1

Centers for Disease Control and Prevention

www.cdc.gov/breastfeding

The National Women's Health Information Center at the Office of Women's Health

www.4woman.gov/breastfeeding

United States Breastfeeding Committee

www.usbreastfeeding.org

WIC Works!

www.nal.usda.gov/wicworks

Part II: What does it look like in practice?

Key Points:

Feeding for infants encompasses:

- ▶ Family and community partnerships
- Education and support for breastfeeding
- Food safety and sanitation
- Health and nutrition services
- Responsive caregiving and curriculum
- Staff training and education

Part III: How do we know it is happening?

Key Points:

- ▶ Look at the documentation
- Talk to people—both teaching staff and families
- ▶ Look at the environment
- ▶ Be careful and sensitive observers

Topic 3

Feeding for Toddlers

Part I: Why is it important?

Key Head Start Program Performance Standard

1304.21(a)(3) Grantee and delegate agencies must support social and emotional development by:

(ii) Planning for routines and transitions so that they occur in a timely, predictable and unrushed manner according to each child's needs.

Other Relevant Standards

Please see the list of Selected Standards Supporting Healthy, Safe, and Developmentally Appropriate Routines for Infants and Toddlers on page 5 of this document.

Selected Child Development Research and Information

American Academy of Pediatrics (2007). *Parenting Corner Q&A: Choking Prevention*. Available at http://www.aap.org/publiced/BR Choking.htm

U.S. Food and Drug Administration (2005). *Prevent your child from choking*. Available at http://www.fda.gov/fdac/features/2005/505 choking.html

Part II: What does it look like in practice?

Key Points:

Feeding for toddlers encompasses:

- ▶ Family and community partnerships
- Education and support for breastfeeding
- Food safety and sanitation
- ▶ Health and nutrition services
- Responsive caregiving and curriculum
- Staff training and education

Part III: How do we know it is happening?

Key Points:

- ▶ Look at the documentation
- ▶ Talk to people—both teaching staff and families
- ▶ Look at the environment
- ▶ Be careful and sensitive observers



Topic 1	Forming Partnerships in Pregnancy
	through Feeding
Notes	
Notes	
Topic	
2	Feeding for Infants
Notes	
Topic	Feeding for Toddlers
3	reeding for Toddlers
Notes	



Supporting Healthy, Safe, and Developmentally Appropriate Routines for Infants and Toddlers

Education and Early Childhood Development

- 1304.21 (a) (3) Grantee and delegate agencies must support social and emotional development by:
- (ii) Planning for routines and transitions so that they occur in a timely, predictable and unrushed manner according to each child's needs.
- 1304.21 (a) (4) Grantee and delegate agencies must provide for the development of each child's cognitive and language skills by:
- (i) Supporting each child's learning, using various strategies including experimentation, inquiry, observation, play and exploration;
 - (iii) Promoting interaction and language use among children and between children and adults;
- 1304.21 (a) (5) In center-based settings, grantee and delegate agencies must promote each child's physical development by:
- (ii) Providing appropriate time, space, equipment, materials and adult guidance for the development of fine motor skills according to each child's developmental level;
- 1304.21 (b) (1) Grantee and delegate agencies' program of services for infants and toddlers must encourage:
- (i) The development of secure relationships in out-of-home care settings for infants and toddlers by having a limited number of consistent teachers over an extended period of time. Teachers must demonstrate an understanding of the child's family culture and, whenever possible, speak the child's language;
- (ii) Trust and emotional security so that each child can explore the environment according to his or her developmental level; and
- (iii) Opportunities for each child to explore a variety of sensory and motor experiences with support and stimulation from teachers and family members.
- 1304.21 (b) (2) Grantee and delegate agencies must support the social and emotional development of infants and toddlers by promoting an environment that:
 - (i) Encourages the development of self-awareness, autonomy, and self-expression; and
- (ii) Supports the emerging communication skills of infants and toddlers by providing daily opportunities for each child to interact with others and to express himself or herself freely.
- 1304.21 (b) (3) Grantee and delegate agencies must promote the physical development of infants and toddlers by:
- (i) Supporting the development of the physical skills of infants and toddlers including gross motor skills, such as grasping, pulling, pushing, crawling, walking, and climbing; and
- (ii) Creating opportunities for fine motor development that encourage the control and coordination of small, specialized motions, using the eyes, mouth, hands, and feet.



Supporting Healthy, Safe, and Developmentally Appropriate Routines for Infants and Toddlers

Child Health and Safety

1304.22 (e) (1) Staff, volunteers, and children must wash their hands with soap and running water at least at the following times:

- (i) After diapering or toilet use;
- (ii) Before food preparation, handling, consumption, or any other food-related activity (e.g., setting the table);

1304.22 (e) (7) Grantee and delegate agencies operating programs for infants and toddlers must space cribs and cots at least three feet apart to avoid spreading contagious illness and to allow for easy access to each child.

Child Nutrition

- 1304.23 (a) Identification of nutritional needs. Staff and families must work together to identify each child's nutritional needs, taking into account staff and family discussions concerning:
- (1) Any relevant nutrition-related assessment data (height, weight, hemoglobin/hematocrit) obtained under 45 CFR 1304.20(a);
- (2) Information about family eating patterns, including cultural preferences, special dietary requirements for each child with nutrition-related health problems, and the feeding requirements of infants and toddlers and each child with disabilities (see 45 CFR 1308.20);
- (3) For infants and toddlers, current feeding schedules and amounts and types of food provided, including whether breast milk or formula and baby food is used; meal patterns; new foods introduced; food intolerances and preferences; voiding patterns; and observations related to developmental changes in feeding and nutrition. This information must be shared with parents and updated regularly; and

Nutritional Services

- 1304.23 (b) (1) Grantee and delegate agencies must design and implement a nutrition program that meets the nutritional needs and feeding requirements of each child, including those with special dietary needs and children with disabilities. Also, the nutrition program must serve a variety of foods which consider cultural and ethnic preferences and which broaden the child's food experience.
- (ii) Each child in a part-day center-based setting must receive meals and snacks that provide at least \1/3\ of the child's daily nutritional needs. Each child in a center-based full-day program must receive meals and snacks that provide \1/2\ to \2/3\ of the child's daily nutritional needs, depending upon the length of the program day.
- (iii) All children in morning center-based settings who have not received breakfast at the time they arrive at the Early Head Start or Head Start program must be served a nourishing breakfast.
- (iv) Each infant and toddler in center-based settings must receive food appropriate to his or her nutritional needs, developmental readiness, and feeding skills, as recommended in the USDA meal pattern or nutrient standard menu planning requirements outlined in 7 CFR parts 210, 220, and 226.
- (vii) Meal and snack periods in center-based settings must be appropriately scheduled and adjusted, where necessary, to ensure that individual needs are met. Infants and young toddlers who need it must be fed "on demand" to the extent possible or at appropriate intervals.



Supporting Healthy, Safe, and Developmentally Appropriate Routines for Infants and Toddlers

Nutritional Services Continued

1304.23 (b) (2) Grantee and delegate agencies operating home-based program options must provide appropriate snacks and meals to each child during group socialization activities

1304.23 (b) (3) Staff must promote effective dental hygiene among children in conjunction with meals.

Meal Service

1304.23 (c) (3) Sufficient time is allowed for each child to eat;

1304.23 (c)(4) All toddlers and preschool children and assigned classroom staff, including volunteers, eat together family style and share the same menu to the extent possible;

1304.23 (c) (5) Infants are held while being fed and are not laid down to sleep with a bottle;

1304.23 (c) (7) As developmentally appropriate, opportunity is provided for the involvement of children in food-related activities.

Food Safety and Sanitation

1304.23 (e) (1) Grantee and delegate agencies must post evidence of compliance with all applicable Federal, State, Tribal, and local food safety and sanitation laws, including those related to the storage, preparation and service of food and the health of food handlers. In addition, agencies must contract only with food service vendors that are licensed in accordance with State. Tribal or local laws.

1304.23 (e) (2) For programs serving infants and toddlers, facilities must be available for the proper storage and handling of breast milk and formula.

Family Partnerships

1304.40 (c) (3) Grantee and delegate agencies must provide information on the benefits of breast feeding to all pregnant and nursing mothers. For those who choose to breast feed in center-based programs, arrangements must be provided as necessary.

Facilities, Materials, and Equipment

1304.53 (a) (4) The indoor and outdoor space in Early Head Start or Head Start centers in use by mobile infants and toddlers must be separated from general walkways and from areas in use by preschoolers.

1304.53 (a) (10) Grantee and delegate agencies must conduct a safety inspection, at least annually, to ensure that each facility's space, light, ventilation, heat, and other physical arrangements are consistent with the health, safety and developmental needs of children. At a minimum, agencies must ensure that:

(xiv) Toilets and handwashing facilities are adequate, clean, in good repair, and easily reached by children. Toileting and diapering areas must be separated from areas used for cooking, eating, or children's activities;

(xv) Toilet training equipment is provided for children being toilet trained;



Supporting Healthy, Safe, and Developmentally Appropriate Routines for Infants and Toddlers

Facilities, Materials, and Equipment Continued

1304.53 (b) (2) Infant and toddler toys must be made of non-toxic materials and must be sanitized regularly.

1304.53 (b) (3) To reduce the risk of Sudden Infant Death Syndrome (SIDS), all sleeping arrangements for infants must use firm mattresses and avoid soft bedding materials such as comforters, pillows, fluffy blankets or stuffed toys.

Home Based Program Option

1306.33 (b) (1) The purpose of the home visit is to help parents improve their parenting skills and to assist them in the use of the home as the child's primary learning environment. The home visitor must work with parents to help them provide learning opportunities that enhance their child's growth and development.

1306.33 (c) (1) The purpose of these socialization activities for the children is to emphasize peer group interaction through age appropriate activities in a Head Start classroom, community facility, home, or on a field trip. The children are to be supervised by the home visitor with parents observing at times and actively participating at other times.

1306.33 (c) (3) Grantees must follow the nutrition requirements specified in 45 CFR 1304.23(b)(2) and provide appropriate snacks and meals to the children during group socialization activities.

To browse the Head Start Program Performance Standards online, please visit the Early Childhood Learning and Knowledge Center (ECLKC) at www.eclkc.acf.ohs.hhs.gov and click on the link located on the left side of the page, under Head Start Act.